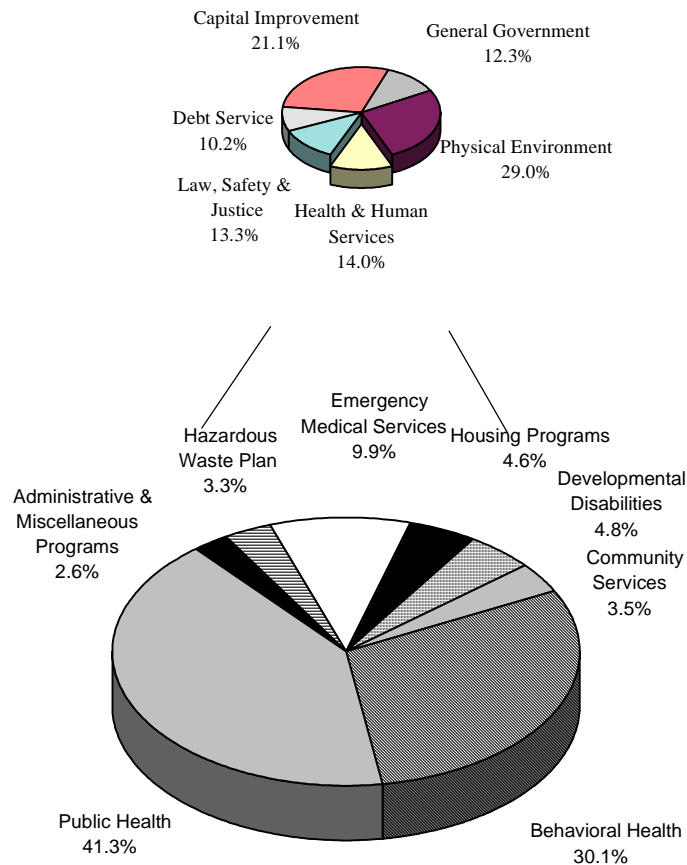


## Health & Human Services \$366 Million



**Organization of the Pie Chart:** The following agencies were combined to make the pie chart more readable.

**Community Services:** CSD - Current Expense, Human Services/CJ, and Grants.

**Behavioral Health:** Mental Health and Alcoholism & Substance Abuse

**Housing Programs:** Federal Housing & Community Development Fund and Housing Opportunity Acquisition.

**Administrative & Miscellaneous Programs:** Veterans' Services, Special Programs, Youth Employment, and Administration

**Source:** Program Plan Summary Page (Found at the end of the section).

### PROGRAM EXPLANATIONS

#### *INTRODUCTION*

The 2000 Proposed Budget for Health and Human Services reflects the County's continuing commitment to providing the best possible services to residents of King County, especially those most vulnerable populations. Health and Human Service agencies are finding new and better ways of doing business while maximizing CX funds and leveraging additional revenues from other sources. The proposed program initiatives outlined below are designed to improve and expand upon current programs that assist those with mental health and/or substance abuse problems, provide access to health care for people who do not have adequate health insurance, and increase the quality of child care for children.

**Assuring Quality Childcare.** In recognition of the importance of quality child care, and as a way to improve its availability in the community, the Metropolitan King County Council passed a childcare wage ordinance in 1999 that seeks to increase the professionalism and retention of childcare workers through a wage incentive pilot program. The Executive Proposed Budget contains \$300,000 to administer this pilot project beginning in 2000 and continuing through 2004. Participating vendors who meet the ordinance requirements, and other program criteria, are eligible for a professionalization and retention subsidy of up to one dollar per hour per employee. In addition, training will be provided to childcare teachers and directors. The purpose of this pilot project is to assess the impacts of increasing salary and benefit levels on the quality of childcare in King County.

**Young Families.** One-time funding is included for the Young Family Independence Program (YFIP). Young people need a strong, marketable skill to compete in the job market. Obtaining these skills usually requires completing a training program that is 12 - 18 months in duration. Due to Welfare Reform, the State will only approve training up to 3 months. \$40,000 will be used to provide child care assistance for parents who do not qualify for State or County funding, so they can attend these longer training sessions. \$20,000 will be used to provide tuition assistance for long-term training. \$20,000 will be used to subsidize the wages of YFIP participants to allow them to get a job that prepares them to become reliable and dependable workers. Finally, \$10,000 will be used to provide specialized parenting classes for some of the YFIP parents.

**Domestic Violence Coordination.** \$92,500 is included to improve domestic violence cross-systems service coordination. Many families involved in domestic violence have multiple issues and their family members may be involved in multiple systems. Frequently, these systems do not communicate with one another and may be unaware of each other's existence in the family's life. There may be lack of understanding regarding roles, responsibilities, and limitations. There also maybe philosophical differences and different levels of understanding of domestic violence and its effects on the family, particularly the children. The King County Women's Program will use this funding to establish more intensive efforts to improve cross-systems coordination for families with domestic violence issues. Activities will include an assessment of problems and barriers that create barriers to effective coordination, training, protocol development, a major conference and other mechanisms designed to increase coordination.

**Developmental Disability Improvements.** There are significant increases in the Developmental Disabilities budget including \$500,000 of one time funding to enhance services for children under 3 years of age with developmental disabilities; \$200,000 to expand employment and recreational opportunities for disabled adults; and funding for currently unserved individuals who live with older parents.

**Public Health Enhancements.** The Public Health budget will increase by 7% and includes the following increases. \$173,000 and 3 positions will be added to the communicable diseases section to help handle the increased workload due to population increases, increases in the number of cases of

## HEALTH & HUMAN SERVICES PROGRAM PLAN

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reportable disease, and also to enable the County to be more proactive in analyzing disease trends. Increases are also included for the laboratory handling outbreak situations as well as for prevention and counseling efforts to decrease the transmission of STD/HIV. \$1.3 million has been awarded to Public Health who will be the prime contractor to provide breast and cervical health program services in King and Snohomish Counties. This grant will enable the department to increase its screening services. Finally, \$1.28 million has been awarded to fund efforts to decrease infant mortality in the African American and Native American communities by linking them to prenatal and pediatric services. This grant will also be used to increase Medicaid outreach in order to increase the number of families with insurance coverage.

**Maximizing Outside Revenues.** In spite of a volatile health care environment with ever changing regulations and unstable revenue sources, Public Health-Seattle/King County (PHSKC) is committed to delivering top quality care and services. In order to maximize outside revenues and minimize reliance on local revenues, PHSKC has restructured its Primary Care division. This change is designed to increase revenues as well as the number of patients that providers can see. It is also a way in which PHSKC can cover the costs of uncompensated care for patients who do not have any or inadequate health insurance. The new program structure will provide centralized oversight for the financial and operational aspects of primary care service delivery. A central operations unit with expertise in financial management, managed care and clinical practice will work to ensure maximum efficiency and quality care. This program change is supported entirely by outside revenues.

**Integrated Services.** The Department of Community and Human Services (DCHS) is continuing to develop services that address chronic substance abuse and mental health problems in King County. In 1999, DCHS integrated the Division of Alcohol & Substance Abuse Services with the Mental Health Division to form the Mental Health Chemical Abuse and Dependency Services Division. This integration allows DCHS to better coordinate a continuum of mental health and substance abuse services. Providing comprehensive and integrated services also facilitates the identification and treatment of each individual's needs. Clients with co-occurring substance abuse and mental health disorders can now receive previously unavailable coordinated care. The new system promotes stability and recovery regardless of whether an individual is experiencing a short-term crisis or a chronic condition that requires ongoing and intensive support services.

In addition, DCHS will assume responsibility from the State for inpatient mental health treatment. The County currently provides outpatient mental health services through the Prepaid Health Plan. Inpatient services are provided on a fee-for-service basis. In accordance with the State mandated integration of outpatient and inpatient mental health services, the County will assume the risk for both service categories in 2000.

### *COMMUNITY & HUMAN SERVICES*

#### *ISSUES AND PRIORITIES*

##### ***Mission*** **Community & Human Services**

To enhance the quality of life, protect rights, and promote the self-sufficiency of our region's diverse individuals, families, and communities.

The 2000 Executive Proposed Budget for the Department of Community & Human Services (DCHS) reflects a continued focus on providing critical human services to the County's most vulnerable populations. The road to achieving this focus continues to be challenging due to static or declining revenue streams. Despite this challenge, the County's Community & Human Services agencies are committed to providing effective and efficient service in response to the demand.

DCHS Administration will receive two Community Corrections Analysts. This 2000 budget add is a County effort to begin thoroughly assessing the status quo of community corrections processes as well as determine the appropriate populations to serve.

In July, 1999, the Metropolitan King County Council passed a child care wage ordinance that seeks to increase the professionalism and retention of child care workers through a wage incentive pilot program. Participating vendors who meet the ordinance requirements, and other program criteria, are eligible for a professionalization and retention subsidy of up to one dollar per hour per employee. The purpose of this pilot project is to assess what impact increasing salary and benefit levels has upon the quality of child care in King County. DCHS will administer this pilot project which begins in 2000 and continues through 2004.

Another program highlight for 2000 includes a Homeless and Human Services Planner position that will serve as the lead analyst in developing and implementing the Human Services Plan. This position will work with many County agencies to ensure better County coordination regarding human services. In addition, Developmental Disabilities is receiving a substantial, one-time revenue add for enhanced services for infants and toddlers under the age of three and their families to treat children with developmental delays.

The 2000 Proposed Budget for DCHS continues to reflect the County's intent to better serve the needs of the people with mental illness and chronic substance abuse problems. This commitment is represented by two initiatives; the assumption of responsibility from the State of inpatient mental health treatment, and the integration of the Division of Alcohol & Substance Abuse Services with the Mental Health Division.

Currently the County provides outpatient mental health services through the Prepaid Health Plan, on a full risk assumption basis from the State. Inpatient services are provided on a fee-for-service basis. In accordance with the State mandated integration of outpatient and inpatient mental health services, the County will assume the risk for both service categories. Integral to the integrated service concept is a contract with an "Entity" which is a risk bearing outside business or not-for-profit organization that will maintain the provider network. The DCHS has begun a Request for Proposal (RFP) process, with an expectation to begin full service provision by July 2000.

In 1999, the DCHS integrated the Division of Alcohol & Substance Abuse Services with the Mental Health Division to form the Mental Health Chemical Abuse and Dependency Services Division (MHCADS). This integration allows DCHS to better coordinate a continuum of mental health and substance abuse services. The new system will promote stability and recovery regardless of whether an individual is experiencing a short-term crisis or a chronic condition that requires ongoing and intensive support services. Clients of these systems will benefit from services provided in a

## HEALTH & HUMAN SERVICES PROGRAM PLAN

comprehensive and integrated fashion that facilitates the identification and treatment of the full spectrum of each individual's needs. Those with either mental health or substance abuse treatment needs will continue to receive the same high quality of care through existing systems. Clients with co-occurring substance abuse and mental health disorders will receive previously unavailable coordinated care, tailored to the complex treatment needs of this population.

<b>Expense Summary For Dept of Community &amp; Human Services</b>		<b>FTEs*</b>
<b>Department Name</b>		
Community & Human Services - Admin	3,706,624	11.50
Community Services Division	12,256,181	38.15
Federal Housing & Community Development	17,940,832	28.92
Housing Opportunity Fund	0.00	3.50
Veterans Services	1,827,060	7.00
Work Training Program	4,576,375	28.08
Developmental Disabilities Division	15,093,279	13.50
Mental Health Division	82,135,379	66.25
Special Programs	609,839	0.00
Human Services/CJ	873,582	0.00
Division of Alcohol & Substance Abuse Services	18,792,701	100.00
<b>Total 1999 Adopted Budget</b>	<b>157,811,852</b>	<b>296.90</b>
<b>Status Quo**</b>		
Community & Human Services - Admin	(2,579,346)	(2.00)
Community Services Division	(1,732,250)	
Federal Housing & Community Development	62,524	(0.67)
Housing Opportunity Fund	0.00	
Veterans Services	(56,288)	
Work Training Program	52,725	
Developmental Disabilities Division	60,650	
Mental Health Division	53,280	
Special Programs	1,314,981	
Human Services/CJ	286	
Division of Alcohol & Substance Abuse Services	1,113,979	
<b>Total Base Increment</b>	<b>(1,709,459)</b>	<b>(2.67)</b>
<b>Status Quo Budget (99 Adopted + Status Quo)</b>		
Community & Human Services - Admin	1,127,278	9.50
Community Services Division	10,523,931	38.15
Federal Housing & Community Development	18,003,356	28.25
Housing Opportunity Fund	0.00	3.50
Veterans Services	1,770,772	7.00
Work Training Program	4,629,100	28.08
Developmental Disabilities Division	15,153,929	13.50
Mental Health Division	82,188,659	66.25

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Special Programs	1,924,820	0.00
Human Services/CJ	873,868	0.00
Division of Alcohol & Substance Abuse Services	19,906,680	100.00
<b>Total Status Quo Budget</b>	<b>156,102,393</b>	<b>294.23</b>
<b>Community &amp; Human Services - Administration</b>		
<b>Significant Program Additions</b>		
Homeless and Human Services Planner	73,500	0.50
2 Program Analysts	132,082	2.00
Non-CX DCHS Admin Rent Increases	13,272	
<b>Technical Adjustments***</b>		
Central Rates	82,152	
<b>Total Community &amp; Human Services - Admin</b>	<b>1,428,284</b>	<b>12.00</b>
<b>Community Services Division</b>		
<b>Significant Program Additions</b>		
Additional Unincorporated Area Council	10,000	
Child Care Labor Subsidy	197,869	0.79
CFS One-Time Funds	222,716	
<b>Technical Adjustments***</b>		
Net Change in TLT, true temps, & FTE's	0.00	0.10
Underexpenditure Contra	(35,179)	
Central Rates	(332,277)	
<b>Total Community Services Division</b>	<b>10,587,060</b>	<b>39.04</b>
<b>Federal Housing &amp; Community Development</b>		
<b>Significant Program Additions</b>		
Housing Planner	41,651	0.50
<b>Technical Adjustments***</b>		
Program Reduction	(1,282,233)	
Central Rates	210,454	
<b>Total Housing &amp; Community Development</b>	<b>16,973,228</b>	<b>28.75</b>
<b>Housing Opportunity Fund *</b>		
<b>Significant Program Additions</b>		
Planner II, HOF Project Manager	0.00	1.00
<b>Technical Adjustments***</b>		
Central Rates	37,651	
Underexpenditure Contra	(32,950)	
Technical Adjustments	(4,701)	
<b>Total Housing Opportunity Fund</b>	<b>0.00</b>	<b>4.50</b>
<b>* Housing Opportunity Fund is budgeted in CIP</b>		

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**HEALTH & HUMAN SERVICES PROGRAM PLAN**

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**Veterans Services****Technical Adjustments\*\*\***

Transitional and Treatment Housing	25,000
Expansion of Pro-Vet Application	22,156
Other Adjustments	11,726
Central Rates	(78,006)

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<b>Total Veterans Services</b>	<b>1,751,648</b>	<b>7.00</b>
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**Work Training Program****Significant Program Reductions**

Transfer Port Jobs to Economic Development	(80,000)
Program Reduction	(928,295)

**Significant Program Additions**

Transfer CX Day Camp Funding from CSD to WTP	128,616
New Start Program	537,446
CFS One Time Funds	100,000

**Technical Adjustments\*\*\***

Underexpenditure Contra	(11,495)
Central Rates	19,821

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<b>Total Work Training Program</b>	<b>4,395,193</b>	<b>28.08</b>
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**Developmental Disabilities Division****Significant Program Additions**

Fiscal Staffing Support	12,090	0.50
Early Intervention Part C	500,000	
Housing Technical Assistance	50,000	
Expand Opportunities for Individuals	200,000	

**Technical Adjustments\*\*\***

Central Rates	(262,721)
Underexpenditure Contra	(5,167)
Program Increase	1,873,269

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<b>Total Developmental Disabilities Division</b>	<b>17,521,400</b>	<b>14.00</b>
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**Mental Health****Significant Program Reductions**

ACCESS Demonstration	(1,492,067)	(1.00)
Mentally Ill Offenders	(10,900)	(1.00)

**Significant Program Additions**

Federal - Child Initiative Grant	483,280	
Outreach & Engagement	450,000	
DYS Assessment Project	50,000	
RSN/PHP Tier & Carveout Programs	8,381,423	
Integrated Entity Administration	50,613	6.00

## HEALTH & HUMAN SERVICES PROGRAM PLAN

<b>Technical Adjustments***</b>		
Central Rate Adjustments	158,418	
Administrative Cost -DASAS	0.00	16.00
<b>Total Mental Health</b>	<b>90,259,426</b>	<b>88.25</b>
<b>Special Programs</b>		
<b>Technical Adjustments***</b>		
Fee Increases	12,282	
Central Rates	619	
<b>Total Special Programs</b>	<b>1,937,721</b>	<b>0.00</b>
<b>Human Services/CJ</b>		
<b>Significant Program Additions</b>		
COLA For Contracts	16,728	
<b>Technical Adjustments***</b>		
Central Rates	23,480	
<b>Total Human Services/CJ</b>	<b>914,076</b>	<b>0.00</b>
<b>Chemical Abuse and Dependency Services</b>		
<b>Significant Program Reductions</b>		
Administration Reductions	(157,797)	(1.00)
Service Contract Reductions	(261,854)	
Transfer to Public Health	(188,471)	
Cedar Hills Treatment Services Reductions	(260,179)	
<b>Significant Program Additions</b>		
Crisis Commitment Monitoring	155,518	1.00
Sobering Services & T&T Services	90,297	
CSAT Mobile Methadone	610,208	
CHAT Medical Services	275,000	4.00
Cedar Hills Clerical Support	34,735	1.00
<b>Technical Adjustments***</b>		
Administrative Cost -DASAS	0.00	(16.00)
Central Rate Adjustments	(291,336)	
<b>Total Chemical Abuse and Dependency Services</b>	<b>19,912,801</b>	<b>89.00</b>
<b>2000 Executive Proposed</b>	<b>165,680,836</b>	<b>310.62</b>

\* FTEs do not include extra help, overtime and term limited.

\*\* This includes revised 1999 adopted, initial status quo, and proposed status quo increments. Under FTEs, annualization is included.

\*\*\* This includes salary and benefit adjustments, volume increases, inflation, central rates adjustments and annualization of 1999 supplementals

### *PROGRAM HIGHLIGHTS*

#### **DCHS Administration**

##### **Significant Program Additions**

**Homeless and Human Services Planner - \$73,500/0.5 FTE.** The Homelessness and Human Services Program Planner will serve as the lead analyst in developing/implementing the Human Services Plan, homelessness planning, and other major initiatives as directed by the department director. This position will better coordinate County human services among DCHS, Executive Office, Office of Regional Policy and Planning, Health Department, Parks and Recreation, and Department of Youth Services.

**Community Corrections - \$132,082/2 FTE.** The two Program Analysts will manage a broad-based community participation effort to reach citizens at large and system stakeholders, find external funding, secure grants, support work groups by analyzing and presenting data and literature, and create recommendations for program change and implementation in regards to community corrections procedures.

**Non-CX DCHS Admin. Rent Increases - \$13,272.** This item adds the non-CX proportionate share of the DCHS Admin. Rent increases for DCHS. The rent increase is calculated by assuming the same square footage occupied in the Exchange Building (The DCHS Admin. New location for 2000) as is presently occupied in the Key Tower. The CX share of the rent increase was built into the 1999 status quo budget.

##### **Technical Adjustments**

**Central Rate Changes - \$82,152.** Central Rate adjustments include CX overhead, rent, and ITS infrastructure.

#### **Community Services Division**

##### **Significant Program Additions**

**Additional Unincorporated Area Council - \$10,000.** This add will provide administrative support for the Unincorporated Area Council in the Snoqualmie area.

**Child Care Labor Subsidy - \$197,869/0.79 FTE.** This add funds the first year of a 5-year pilot project. The purpose of this pilot project is to assess what effect increasing salary and benefit levels has upon the quality of childcare in King County. This program will be administered by an Office Tech II (.29 FTE) and a Program Representative (.50 FTE). Seven South King County Childcare providers will be chosen as pilot program participants. In addition, the Children and Family Commission (CFC) will contribute \$50,000 to fund an evaluation.

**Children & Family Services - One-Time Funds – \$222,716.** CSD was presented with an opportunity for the use of one-time Children and Family Services Set Aside funds. The agency chose to provide: Enhanced Child Care Provider Training (\$100,000), Domestic Violence Cross-Systems Coordination (\$85,216), and Technology Upgrades (\$37,500).

##### **Technical Adjustments**

**Net Change in TLT, true-temps, & FTEs - \$0/0.1 FTE.** The net impact of a series of technical changes in personnel resulted in \$0 adjustment and a 0.1 FTE addition. The .10 FTE is an office technician position that will be maintaining a permanent database. The City of Seattle will be partially funding this position.

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**Underexpenditure Contra – (\$35,179).** The Executive Proposed 2000 Budget includes a 1% underexpenditure contra in each CX operating and CX transfer budget to directly budget for assumed underexpenditure levels. A remaining central contra of .75% is being held in the CX Financial Plan, for a total assumption of 1.75% underexpenditure for all CX operating and CX transfer budgets. While it is a change in that the contra is now directly placed in each budget, it is the same policy as in previous years. CX Departments are asked to manage to a total underexpenditure requirement of 1.75%. The underexpenditure requirement for CSD was calculated on the administrative portion of its budget only.

**Central Rate Changes - (\$332,277).** Central Rate adjustments include finance rates, rent, and Motor Pool.

### **Federal Housing & Community Development**

#### **Significant Program Additions**

**Housing Planner - \$41,651/0.50 FTE.** The Consortium's Joint Recommendations Committee recommends this additional .5 FTE be paid from HOME funds to assist the lead Federal Housing & Community Development planner with implementing the Fair Housing Action Plan and other duties.

#### **Significant Program Reductions**

**Program Reduction – (\$1,282,233).** The \$1,283,233 reduction in this fund represents a 2000 forecasted reduction in recaptured funds (funds in excess of what is needed to perform a program or service) and in the Shelter Plus Care program. Of this decrease, \$594,008 is associated with reduced income in the Shelter Plus Care program for homeless adults. The program will issue 100 fewer housing vouchers in 2000. The recaptured funds estimate will be reviewed and updated prior to passage of the 2000 appropriations ordinance.

#### **Technical Adjustments**

**Central Rate Changes - \$210,454.** Central Rate adjustments include rent, finance rates, CX overhead, ITS infrastructure, and debt service.

### **Housing Opportunity Fund**

#### **Significant Program Additions**

**Planner II, HOF Project Manager - \$0/1.0 FTE.** The number of active HOF projects has grown to 30 requiring the conversion of a TLT to a FTE Career Service HOF project manager. The HOF funds housing development and preservation for low-income households with income below 50% of median. This proposal will increase efficiency and timelines of HOF project management, assisting clients served by the Division of Mental Health & Chemical Abuse Dependency and other County agencies.

#### **Technical Adjustments**

**Underexpenditure Contra - (\$32,950).** The Executive Proposed 2000 Budget includes a 1% underexpenditure contra in each CX operating and CX transfer budget to directly budget for assumed underexpenditure levels. A remaining central contra of .75% is being held in the CX Financial Plan, for a total assumption of 1.75% underexpenditure for all CX operating and CX transfer budgets. While it is a change in that the contra is now directly placed in each budget, it is the same policy as in previous years. CX Departments are asked to manage to a total underexpenditure requirement of 1.75%.

**Central Rate Changes - \$37,651.** Central Rate adjustments include rent and ITS infrastructure.

### Veterans Program

#### **Technical Adjustments**

**Transitional and Treatment Housing - \$25,000.** This program supports the existing Incarcerated Veteran's Project and the Veteran's Administration Medical Center (VAMC) by providing additional housing for veterans coming out of in-patient alcohol treatment. The program's goal is to break the cycle of the combination of alcohol addiction and homelessness placing the veteran back into the jail system.

**Expansion of Pro-Vet Application - \$22,156.** The Pro-Vet Application is a database that assists the Veterans Program in identifying veteran eligibility and Veterans Program usage patterns regarding financial cash assistance for King County veterans. Fund balance supported.

**Other Adjustments - \$11,726.** This item increases funds for two purposes. The first is a Security Guard benefit rates increase for which the Veteran's fund is accountable. The second is an increase in the Contra/Contingent account. This account increase allows Veterans Programs to carry forward 1999 COLA and benefit increases that did not get carried forward during the Proposed Status Quo budget phase.

**Central Rate Changes - (\$78,006).** Central Rate adjustments include ITS O&M, finance rates, and CX overhead.

### Work Training Program

#### **Significant Program Reductions**

**Program Reduction – (\$928,295).** In 2000, the Federal Job Training Partnership Act will be superseded by the Workforce Investment Act (WIA). This change will result in a projected revenue decrease of 41%, \$802,438, in federal funding for youth employment programs for both in-school youth and dropouts. The balance of the decrease was needed changes and transfers associated with this loss.

**Transfer Port Jobs to Economic Development – (\$80,000).** The Port jobs contract will be transferred to Economic Development. Service will still be provided but will be sub-contracted by Economic Development.

#### **Significant Program Additions**

**Transfer CX Day Camp Funding from CSD to WTP - \$128,616.** Funds formerly used to support summer reading day camps for elementary age children will be reprogrammed to serve low-income youth with serious risks of dropping out of school. The program is double budgeted in CSD and WTP.

**New Start Program - \$537,446.** This project will provide community services, training, and employment opportunities to gang and criminal justice involved youth. This program is funded through the Private Industry Council.

**CFS One-Time Funds - \$100,000.** DCHS was presented with an opportunity for the use of one-time Children and Family Services Set-Aside funds. The agency chose to provide Youth and Family Independence (YFIP) Enhancements plus \$10,000 for technology improvements.

#### **Technical Adjustments**

**Underexpenditure Contra – (\$11,495).** The Executive Proposed 2000 Budget includes a 1% underexpenditure contra in each CX operating and CX transfer budget to directly budget for assumed underexpenditure levels. A remaining central contra of .75% is being held in the CX Financial Plan, for a total assumption of 1.75% underexpenditure for all CX operating and CX transfer budgets. While it is a change in that the contra is now directly placed in each budget, it is the same policy as in previous years. CX Departments are asked to manage to a total underexpenditure requirement of 1.75%.

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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**Central Rate Changes - \$19,821.** Central Rate adjustments include flex benefits, ITS O&M/infrastructure, and rent.

### **Developmental Disabilities**

#### **Significant Program Additions**

**Fiscal Staffing Support - \$12,090/0.50 FTE.** A Data Entry/Office Assistant position will be increased from half time to full-time due to the volume of work.

**Early Intervention Part C - \$500,000.** This program is a one-time revenue add for enhanced services for infants and toddlers and their families to treat children with developmental delays under 3 years of age.

**Housing Technical Assistance - \$50,000.** Developmental Disabilities (DD) Fund balance will be used to fund a technical assistance program based on a 1998 Housing Needs Assessment to assist individuals with DD in public and private housing funding.

**Expand Opportunities for Individuals - \$200,000.** This program supports increasing social, employment, and recreational opportunities for adults with developmental disabilities.

#### **Technical Adjustments**

**Program Increase - \$1,873,269.** An increase of \$1.3 million in funding from the State Department of Social and Health Services (DSHS) will allow the Division to increase the number of adults in King County who receive employment and community access services. The major share of the new funding will be used, in accordance with Legislative directives, for specific target populations which include currently-unserved individuals who live with older parents. The other portion of the \$1.3 million increase will be used to continue services for adults who started receiving services late in 1998 or during 1999. An additional \$500,000 increase in Federal funds will be used to enhance infant/toddler early intervention services for children ages birth to 36 months and their families.

**Underexpenditure Contra – (\$5,167).** The Executive Proposed 2000 Budget includes a 1% underexpenditure contra in each CX operating and CX transfer budget to directly budget for assumed underexpenditure levels. A remaining central contra of .75% is being held in the CX Financial Plan, for a total assumption of 1.75% underexpenditure for all CX operating and CX transfer budgets. While it is a change in that the contra is now directly placed in each budget, it is the same policy as in previous years. CX Departments are asked to manage to a total underexpenditure requirement of 1.75%.

**Central Rate Changes – (\$262,721).** Central Rate adjustments include CX overhead, ITS new development/O&M, insurance, rent, and finance rates.

### **MHCADS – Mental Health Services Fund**

#### **Significant Program Reductions**

**ACCESS Demonstration – (\$1,492,067/1.0 FTE).** This federal pilot project is ending. The activities found to be of greatest value that were supported by the \$1.5 million federal grant will be continued through a different program, Homeless Outreach, Stabilization, and Treatment program (see below).

**Mentally Ill Offender – (\$65,000/1.0 FTE).** This proposal reflects the reduction of \$65,000 and 1.0 FTE from a state grant program for easing the transition into the community of released mentally ill offenders.

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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### **Significant Program Additions**

**Federal Child Initiative Grant – \$483,280.** This proposal annualizes the grant initially awarded in 1999 for enhancing and consolidating funding for children’s mental health programs. The goal is to consolidate the fragmented and categorical funding streams that target young people with mental illness to ensure accountability and effective care for this population.

**Homeless Outreach, Stabilization, and Treatment (HOST) – \$450,000.** This proposal would restore some of the services from the federally funded ACCESS program. The HOST program will focus on the most needy of the mentally ill populations in King County: severely ill, homeless persons. The HOST contractor will engage this population with active outreach measures, attempt to stabilize acute conditions, obtain housing placement, and treatment. Although the \$450,000 proposal would initially be funded from the Mental Health fund balance, State RSN resources will fund the program starting in 2001.

**DYS Assessment Program – \$50,000.** Funded by state RSN resources, this \$50,000 program increase (to \$150,000) would continue development of a juvenile mental health triage program. The program, modeled after the existing Crisis Triage Unit at Harborview, would be staffed in conjunction with Children’s Hospital, and located in the Upper Alder building. The MHCADS considers the current practice of seeing both adults and juveniles at the Crisis Triage Unit as not being in the best interests of the youth.

**Integrated RSN/PHP Program – \$8,381,423.** Currently the County provides outpatient mental health services through the Prepaid Health Plan, on a full risk assumption basis from the State. Inpatient services are provided on a fee-for-service basis. This proposed increase for integration of Regional Service Network services and Prepaid Health Plan services includes funding for the State mandated integration of outpatient and inpatient mental health services. The budget proposal assumes that the County will start providing inpatient services in July 2000.

**Administration of Integrated Services Entity – \$50,613/6.0 FTE.** Integral to the integrated service concept is a contract with an “Entity” which is a risk bearing outside business or not-for-profit organization that will maintain the provider network. The MHCADS proposes 4.0 FTE (3.0 transferred from the Substance Abuse Fund) for IS support to the division, and 2.0 FTE to administer the Entity.

### **Technical Adjustments**

**Central Rate Changes – \$158,418.** Central rate adjustments include CX overhead, ITS, Finance, telecommunications, lease, and labor settlement rates.

**Administrative Costs and Charge Back to Substance Abuse Fund – 16.0 FTE.** The 2000 Proposed Budget will transfer 16.0 FTE from the Substance Abuse fund to the Mental Health fund. This is actually a net zero transaction to each fund as it also includes a charge back to the Substance Abuse fund for the administrative costs. An offsetting adjustment is included in the Substance Abuse fund proposal.

The department believes that this change will assist in accurately assessing each fund’s administrative costs. Due to the nature of the reorganization, many managers and administrative staff are providing services to both units. The Department is of the opinion that consolidating the expenditures and distributing them on a proportionate basis from one fund is simpler than the alternative.

## **Special Programs**

### **Technical Adjustments**

**Fee Increases - \$12,282.** This item budgets membership fee increases for various associations with whom the County is involved. These organizations include: the Puget Sound Regional Council, the Washington State Association of Counties, and the Washington Association of County Officials.

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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**Central Rate Changes - \$619.** Central Rate adjustments include finance rates.

### **Human Services/CJ**

#### **Significant Program Additions**

**COLA for Contracts – \$16,728.** This request provides Human Service/CJ Community Contracts a 4% COLA increase.

#### **Technical Adjustments**

**Central Rate Changes - \$23,480.** Central Rate adjustments include finance rates.

### **MHCADS – Alcoholism and Substance Abuse Services Fund**

#### **Significant Program Reductions**

**Administration Reductions – (\$157,797/1.0 FTE/2.0 TLT).** This proposal will reduce administrative costs, and shift 1.0 FTE and 2.0 TLTs previously shown in Administration to the Mental Health fund. Information Services (IS) costs previously charged as administrative costs are allocated on a per workstation basis to direct cost centers to more accurately reflect the cost of service.

**Contracted Services Reductions – (\$261,854).** This proposal reduces contracted chemical abuse and dependency treatment to youth and adults in King County due to a reduction in state funding. In addition, the spending of one-time fund balance in 1999 created a non-sustainable level of service (bow wave) in many programs. The department continues to work to find the best way of bringing programs to a sustainable level while minimizing the impact to current clients and treatment providers.

**Transfer to Public Health – (\$188,471).** This proposal reduces chemical abuse and dependency prevention programs targeted at youth and adults in King County. The reduction is caused by a decrease in federal and state funding.

**Cedar Hills Treatment Services Reduction – (\$260,179).** This proposal reduces residential chemical abuse and dependency treatment to youth and adults at the Cedar Hills treatment facility due to a reduction in state funding.

#### **Significant Program Additions**

**Crisis Commitment Monitoring – \$155,518/1.0 FTE.** This proposal provides an increase in State funding and 1.0 FTE for a State required involuntary commitment monitor.

**Sobering Services and Emergency Transportation – \$90,297.** This proposal provides an increase in State funding for ongoing sobering services.

**CSAT Mobile Methadone – \$610,208.** The 2000 Proposed Budget includes the annualization of a 1999 federal grant for mobile methadone dispensing.

**CHAT Medical Services –\$275,000/4.0 FTE.** The 2000 Proposed Budget contains an increase of \$275,000 CX and 4.0 FTE to continue limited on-site medical services to Cedar Hill residents. Similar services were previously provided by the Seattle-King County Public Health Department. There is a corresponding decrease to the Seattle-King County Public Health CX transfer.

**Cedar Hills Clerical Support – \$34,735/1.0 FTE.** The MHCADS is adding a 1.0 FTE Office Technician II to provide additional billing support.

#### **Technical Adjustments**

**Central Rate Changes – (\$291,336).** Central rate adjustments include CX overhead, ITS, Finance, telecommunications, and lease rates.

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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**Administrative Costs and Charge Back to Substance Abuse Fund – (16.0 FTE).** The 2000 Proposed Budget will transfer 16.0 FTE from the Substance Abuse fund to the Mental Health fund. This is actually a net zero transaction to each fund as it also includes a charge back to the Substance Abuse fund for the administrative costs. An offsetting adjustment is included in the Mental Health fund proposal.

The Department believes that this change will assist in accurately assessing each fund's administrative costs. Due to the nature of the reorganization, many managers and administrative staff are providing services to both units. The department is of the opinion that consolidating the expenditures and distributing them on a proportionate basis from one fund is simpler than the alternative.

### ***OTHER SIGNIFICANT ADDITIONS***

**Children and Family Commission Reorganization.** The 2000 Executive Proposed Budget includes the transfer of the Children and Family Commission from the Department of Community and Human Services to the Office of Regional Policy and Planning. This transfer was made during the Status Quo phase of the budget and equals \$2,648,219 and 2 FTEs.

### ***PUBLIC HEALTH***

#### ***Mission***

#### **Public Health**

To achieve and sustain healthy people and communities throughout King County by providing public health services which promote health and prevent disease.

#### ***ISSUES AND PRIORITIES***

Public Health- Seattle/King County (PHSKC) is responsible for overseeing population-based health concerns in the City and County. By preventing the high costs to society that come from epidemics, polluted water systems, and other health risks, the public health system saves resources every year in health care and social costs. PHSKC's key priorities for the next five years will involve addressing the following:

- Promoting better health and wellness for the entire population of King County;
- The emergence of infectious diseases including resistant strains of common diseases;
- Increasing rates of chronic disease in our aging population;
- The increasing need for primary medical and dental health services for high risk, low-income, and uninsured people, many of whom do not speak English; and
- Managing a changing revenue base with service provision based increasingly on acquisition of outside revenue. Public Health must aggressively capture reimbursements and grant funds in order to provide needed services.

The 2000 Budget for PHSKC contains several program changes and initiatives designed to help the department achieve its goals and deliver the best care and services to City and County residents. One change involves a restructuring of its Primary Care division. This change is designed to maximize revenues as well as the number of patients that providers can see. It is also a way in which PHSKC can cover the costs of uncompensated care for patients who do not have any or inadequate insurance. The new program structure will provide centralized oversight for the financial and operational aspects of primary care service delivery. A central operations unit with expertise in financial management, managed care and clinical practice will work to ensure maximum efficiency and quality care. This program change is supported entirely by outside revenues.

Another large investment for PHSKC is a new computer system for Environmental Health, Pharmacy, and Primary Care. The current computer system was installed in 1982 and consequently, it is no longer able to meet PHSKC's growing needs and responsibilities. The new system- Seattle King County Information Links- will be implemented by the end of 1999 for the Environmental Health Division and Pharmacy. The department will continue the project into 2000, during which time, the primary care services component will be implemented. The new system will give PHSKC the ability to track patient prescriptions, manage appointments, and ensure timely billing for services.

Another technology improvement is in development for the Emergency Services Division (EMS). EMS and local emergency medical services providers have joined to develop a regional data collection system which will improve access to information on the quality of patient care, efficiency of resource utilization and effectiveness of prevention programs. The goal of the project is to electronically collect and consolidate data to provide increased reporting and analysis capabilities of all emergency medical incidents within King County. The project will also support special studies, quality assurance and continuous quality improvement efforts within King County, EMS and other agencies.

## HEALTH & HUMAN SERVICES PROGRAM PLAN

Expense Summary for <i>Public Health</i>		FTEs*
<b>Department Name</b>		
Public Health Fund	141,482,292	1344.08
Emergency Medical Services	41,002,230	90.32
Local Hazardous Waste	10,120,768	
<b>Total 1999 Adopted Budget</b>	<b>192,605,290</b>	<b>1,434.40</b>
<b>Status Quo**</b>		
Public Health Fund	2,750,838	-0.01
Emergency Medical Services	498,776	
Local Hazardous Waste	0	
<b>Total Base Increment</b>	<b>3,249,614</b>	<b>(0.01)</b>
<b>Status Quo Budget (99 Adopted + Status Quo)</b>		
Public Health Fund	144,233,130	1,344.07
Emergency Medical Services	41,501,006	90.32
Local Hazardous Waste	10,120,768	
<b>Total Status Quo Budget</b>	<b>195,854,904</b>	<b>1,434.39</b>
<b>Public Health Fund</b>		
<b>Significant Program Reductions</b>		
CX Target Reductions (excluding Jail and NRF)	(170,226)	(1.21)
AIDS/STD Programs	(583,299)	(0.85)
Family Planning/Women & Child Health	(283,939)	(5.45)
Cedar Hills Medical Clinic Restructure	(340,373)	(6.25)
Alcohol, Tobacco, and Other Drugs	(176,486)	(2.00)
City of Seattle Reductions	(695,962)	(9.00)
Environmental Health Target Reduction	(174,721)	(6.80)
Environmental Health - Other Reductions	(235,078)	
Water/Wastewater Supervision Consolidation	(72,780)	(1.00)
North Rehabilitation Target Reduction	(203,969)	(4.00)
Jail Health Target Reduction	(444,503)	(4.50)
North Rehabilitation Facility- Other Reductions	(54,703)	
Other Misc. Changes	(61,664)	
<b>Significant Program Additions</b>		
Communicable Disease Supplemental Request	172,975	3.00
Lab Supplemental Request for Outbreak Situations	51,349	0.50
Medical Examiner Additions	107,786	0.50
Add FTE's To Maintain Immunization Services	118,765	2.22
SKIL Project	1,173,219	2.00
Centralized Accountability for Primary Care	675,099	8.45
Administrative Services Restructuring (net add of \$507.00)	113,416	4.00
AIDS/STD Programs	326,546	(0.67)
Family Planning/Women & Child Health	2,894,802	6.80
Clinic Improvements	183,619	1.25
Alcohol, Tobacco, and Other Drugs	99,735	1.00
Computer/Tech Upgrades	77,934	0.67

## HEALTH & HUMAN SERVICES PROGRAM PLAN

Community Health Center Contracts - King County	125,283	0.04
Grants	925,306	3.00
Labor	480,242	
City of Seattle Adds	1,024,481	6.97
Value of vaccines, adjustment to 1998 actuals	811,886	
Food Handlers Cards	118,152	(2.12)
Volume/Time Factor Adjustments	343,328	6.11
Cross Connections	150,432	2.28
Central Environmental Health Rent	90,481	
North Rehabilitation Facility- DUI & Jail Industries	179,643	4.00
North Rehabilitation Facility Security Coverage	125,847	3.00
North Rehabilitation Facility Supplies	7,332	
Jail Health - Program Analyst IV	34,481	0.50
<b>Technical Adjustments***</b>		
Central Rates	693,117	
Position Clean Ups and Other Changes	(461,292)	(2.51)
Technical Adjustment	(93,430)	(0.38)
<b>Total Public Health Fund</b>	<b>151,285,961</b>	<b>1,353.62</b>
<b>Emergency Medical Services</b>		
<b>Significant Program Additions</b>		
Program Analyst IV - TLT	60,701	
Criteria Based Dispatch Licensing	23,000	
Regional Data System Enhancement	275,000	
Paramedic Vehicle Replacement	665,273	
<b>Technical Adjustments***</b>		
Technical Adjustments	(357,546)	0.18
Central Rates	(61,525)	
Interest-Short Term Adjustment	(6,000,000)	
<b>Total Emergency Medical Services</b>	<b>36,105,909</b>	<b>90.50</b>
<b>Local Hazardous Waste</b>		
<b>Significant Program Additions</b>		
Local Hazardous Waste Initiatives	1,506,435	
<b>Total Local Hazardous Waste</b>	<b>11,627,203</b>	
<b>2000 Executive Proposed</b>	<b>199,019,073</b>	<b>1444.12</b>

\* FTEs do not include extra help, overtime and term limited.

\*\* This includes revised 1999 adopted, initial status quo, and proposed status quo increments. Under FTEs, annualization is included.

\*\*\* This includes salary and benefit adjustments, volume increases, inflation, central rates adjustments, and annualization of 1999 supplementals.

### *PROGRAM HIGHLIGHTS*

#### **Significant Program Reductions**

**CX Target Reductions - (\$170,226/1.21 FTEs).** These reductions were made to CX funded programs. Minimal, if any, service impacts have resulted. The reductions include a half-time Epidemiologist (26,879), a .25 reduction for a Dental Hygienist (17,294), a .5 Administrative Specialist (15,625), and contracted services for physician time (86,918) that was never used. It also includes savings from a reduction in motor pool rates (23,510). PH was also able to replace 377,680 in CX with other revenues in the family planning and parent child health programs.

**AIDS/STD Programs - (\$583,299/.85 FTE).** Most of these reductions reflect completed grant funded projects or a necessary decrease in program expenditures because the grant awards have not kept up with inflation. Most of the reductions were taken in supply lines. One study for 152,000 is being reduced because the research is done and the project is almost complete. Another proposal reduces expenditures by 70,000 and 1.00 contract FTE at the STD clinic, made possible by of the 1998 consolidation of the Broadway and Harborview clinics.

**Family Planning/Women and Child Health - (\$283,939/5.45 FTEs).** This reduction includes a maternity liaison contract with the UW (13,000) as PH is merging maternity services into family health and closing operation of one maternity clinic. PH is also reducing a .5 Health Services Assistant, a .5 Nurse Practitioner in East Region and a .05 Nurse practitioner in South Region in Family Planning. Client volumes will be maintained and service delivery will not be impacted by this cut. The largest reduction of 183,986 and 4.25 FTEs is occurring in the Women, Infants, and Children Program (WIC). The proposal reduces the hours of seven Administrative Specialists II & IIIs. Some will continue to work half time. This reduction does not reduce client services. A new automated system that allows scheduling, client eligibility determination, and reduced filing and paperwork has made this reduction possible. The reductions are based on changes experienced in other counties that have implemented this computer system.

**Cedar Hills Medical Clinic Restructure - (\$340,373/6.25 FTEs).** The Department of Community and Human Services (DCHS) will be assuming responsibility for limited on-site medical services at Cedar Hills; 275,000 of this decrease represents a transfer to DCHS.

**Alcohol, Tobacco, and Other Drugs - (\$176,486/2.00 FTEs).** This reduction will reduce a Program Analyst IV position that is currently vacant (65,236/1.00FTE). It also reduces 1.00 Health Educator in the tobacco prevention program due to a reduction in federal funding. Four less training spots will be available per month to the 19 school districts as a result. The federal grant targeted these specific services for a reduction.

**City of Seattle Program Reductions - (\$695,962/9.00 FTEs).** PH has made some reductions to programs within the City of Seattle. They include reductions in the Refugee Health Access Program (76,023/3.00 FTEs) and (36,992/.5 FTE) in the Childcare Health Program. The largest reduction is in Dental Services (394,048/3.5 FTEs). This reduction has no service impacts since the reduction in FTEs are vacant positions that were initially intended for a new service model that will not be implemented at this time.

**Environmental Health Target Reduction – (\$174,721/6.80 FTEs).** This reduction eliminates one routine inspection per year for approximately 6,000 of the 8,900 food establishments. Lower risk establishments will be targeted for this reduction.

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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**Environmental Health Other Reductions – (\$235,078).** This reduction is in response to an increase in operating expenditures exceeding the agency's ability to generate additional revenues. The reduction is a part of the elimination of the routine inspections for food establishments mentioned above.

**Water/Wastewater Supervision Consolidation – (\$72,780/1.00 FTE).** The reduction is the result of a consolidation of two environmental health programs. The consolidation eliminates one supervisor position and place responsibility for both programs with one position.

**North Rehabilitation Facility Target Reductions – (203,969/4.00 FTEs).** The reduction eliminates the Drug/Alcohol Treatment Program at the Regional Justice Center. The program provided recovery readiness assessment, counseling and case management services to approximately 64 male and 25 female inmates.

**Jail Health Target Reductions – (\$444,503/4.50 FTEs).** This reduction will convert Registered Nurse positions into License Practical Nurse positions. The reduction also includes the elimination of a Program Analyst I, a Program Analyst II, two Registered Nurse positions and a .50 FTE Staff Physician. Due to operational efficiencies, these changes will not result in a reduction in service.

**North Rehabilitation Facility – Other Reduction – (\$54,703).** This reduction corrects an error in the Motor Pool account.

**Other Miscellaneous Changes - (\$61,664).** This proposal includes a reduction in a .5 coordinator for 36,998 in the Childcare Health program. This change was possible because the City and County moved to one location and reduced the need for a full-time coordinator. This proposal also contains a reduction in a completed project in the Evaluation Unit and a .5 FTE program planner at the Youth Health Centers. The net FTE count for these changes is 0. No direct service impacts will result.

### **Significant Program Additions**

**Communicable Disease Supplemental Request - \$172,975/3.00 FTEs.** This request would add a Public Health Nurse, a Disease Intervention Specialist, and an Administrative Specialist to the Communicable Disease Section. Population increases, increases in cases of reportable disease, upcoming unfunded mandates that expand reporting requirements, and the need to be more proactive in analyzing disease trends have made additional resources necessary. This request is funded by CX.

**Lab Supplemental Request for Outbreak Situations - \$51,349/.5 FTE.** Public Health is requesting a .5 FTE and additional supplies for the Public Health Lab. This proposal would increase a .5 Microbiologist to full-time. The addition is needed to address increased workload during outbreaks, increased screening for STDs, new studies (HIVIS study) and unscheduled absences. This request is funded by CX.

**Medical Examiner Additions - 107,786/.5 FTE.** This request, funded by CX, will be used to hire a part-time Pathologist needed to maintain the Medical Examiner's accreditation and other salary needs.

**Add FTEs To Maintain Immunization Services - \$118,765/ 2.22 FTEs.** This proposal requests additional FTEs to accommodate growth and grant responsibilities related to the vaccine distribution program and related quality assurance and education activities for health care providers. The FTEs are supported by increased revenue from Medicaid Administrative Match and federal immunization program funds.

**SKIL Project - \$1,173,219/2.00 FTEs.** This add is the third and final installment of a new information system for PH. The Environmental Health components are to be implemented 1999. The two FTEs

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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associated with this request are information systems specialists needed to run the Pharmacy and EH components. The Pharmacy component will be added late 1999 or early 2000. The final piece consists of a billing and scheduling system that will assist PH in its primary care practices and other clinic services as well as assure proper reimbursement.

**Centralized Accountability for Primary Care - \$675,099/ 8.45 FTEs.** This request is one of the bigger changes occurring in Public Health budget for the year 2000. With this restructuring, PH anticipates that it will be able to cover the costs of uncompensated care at three Seattle Clinics and the KC clinic at Eastgate. 43% of visits at these clinics are uncompensated. This program is intended to provide centralized oversight for the financial and operational aspects of primary care service delivery. This restructuring creates a central operations unit with expertise in financial management, managed care and clinical practice. This program change also combines Pediatrics and Family Health at three of the four sites.

**Administrative Services Restructuring - \$113,416 /4.00FTEs.** The Health Department is restructuring its financial management division with the intention of improving its revenue forecasting abilities and the quality of its financial information. This change is also intended to make it easier for PH to respond to information requests from the City of Seattle and King County. Two TLTs will be replaced with FTEs and two additional FTEs will also be added for a total of four FTEs. One of the additional FTEs is a certified coding specialist in the Accounts Receivable Section. This position is intended to generate increased revenues and is revenue backed which will support the costs of the position. The other additional FTE is an accountant position who will be responsible for monitoring and reconciling capitation revenue for Public Health managed care plans and capitated FQHC payments. This FTE was transferred from the COPC division.

**AIDS/STD Programs - \$326,546/.67 FTE.** PH has several program additions to its AIDS/STD programs. One new initiative is a pilot project that will provide “client-centered counseling” to Men who have Sex with Men (MSM) as a way to reduce STD transmissions among this population. The project will be modeled after a Center for Disease Control study. The 155,000 in CX funding will be used for contract work at Harborview. Other additions are primarily grant-funded projects.

**Family Planning/Women and Child Health - \$2,894,802/6.80 FTE.** This addition includes two large grant increases. PH has been chosen to be a prime contractor to provide Breast and Cervical Health Program services for King and Snohomish counties. The additional service area will support the Women’s Health Unit infrastructure and provide increased screening services. The increase is for 1,331,015 and 2.00 FTEs. The other grant increase will support an extension of the Infant Mortality and Medicaid Outreach program for 1,282,324 and .5 FTE. There are two parts to this project. The first part involves efforts to prevent infant mortality in African American and Native American communities by linking them to prenatal and pediatric care and family planning services. The second part of the program involves Medicaid outreach, with the goal of increasing the number of families with insurance coverage. A large part of this funding is contracted out to community organizations. PH is also adding 110,546 and 1.8 FTE to its Maternity Support Services, which provide education and counseling visits to pregnant and postpartum women. Finally, 170,917 and 2.50 FTEs will be added at DCHS Community Service Offices. PH provides family planning services on-site to interested individuals, including counseling and referral to family planning services, pregnancy testing, general health information and referral.

**Clinic Improvements - \$183,619/1.25 FTEs.** This add includes an increase in pharmaceuticals which is related to South County’s newly formed partnership with Community Health Care Clinics of King County (CHCKC) and specifically to the jointly provided services at the Roxbury Family Healthcare Clinic in White Center. Prescriptions are provided at low or no cost because most of the patients are at-risk or uninsured. There is also an increase in Medical Records support and

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management totaling \$92,318 and 2.00 FTEs. The Travel Clinic will also increase by \$36,301 based on an increase in immunization fees to most closely reflect fees of other community providers.

**Alcohol, Tobacco, and Other Drugs - \$99,735/1.00 FTE.** This addition includes a Program Analyst II position for \$66,379. The person in this position will conduct community needs assessment and act as a liaison with substance abuse treatment providers serving women, parents, and children. There is also an increase in the tobacco prevention program that will make it possible to conduct tobacco compliance checks on Sunday.

**Computer/Technology Upgrades - \$77,934/.67 FTE.** This addition includes funding for the PC replacement program, a position adjustment for the PH information system, and an EDP hardware reduction. The total nets to \$77,934.

**Community Health Center Contracts/King County - \$125,283/.04 FTE.** PH is increasing Community Health Center Contracts to reflect increases in HCFA matching funds. These programs provide, via contracts, safety net funding for community health centers.

**Grants - \$925,306/3.00 FTEs.** PH has received several grants for the year 2000 that will fund a variety of programs. Some of the larger grants include \$194,000 for the Healthcare for the Homeless program, \$127,736 for substance abusing women, and \$259,049 for Healthy Kids 2001.

**Labor - \$480,242.** PH needs to increase its budget to pay for the cost of several labor settlements that have been or will be approved. This add also includes a 138,879 technical adjustment for the retirement rate that increased after the status quo budget had been completed.

**City of Seattle Adds - \$1,024,481/6.97 FTEs.** PH made several increases to programs within the City of Seattle. Included in this proposal is 233,205 for the Families and Education Levy programs, Dental Clinic Expenditures for 55,000, adjustments to the Northwest Family Center Subcontract for 327,504 and an increase in HCFA matching funds of 174,145 for Community Health Center Contracts.

**Value of Vaccines - \$811,886.** PHSKC has received additional vaccine funding from the Washington State Department of Health for childhood immunizations

**Food Handlers Cards - \$118,152/(2.12 FTEs).** Effective January 1, 2000, local health departments are required to provide a minimum of thirty minutes of interactive training prior to giving the food worker's test and issuing the card. The add reflects an increase in the number of cards that will be issued in the year 2000. Due to the increase in costs associated with the new requirement and the maximum charge of \$8 per card set by the State, the increase in revenue would not be sufficient to cover those costs. Environmental Health will reduce staff and provide classes and issue testing at one site instead of nine sites.

**Volume/Time Factor Adjustments - \$343,328/6.11 FTEs.** This add reflects volume and activity time adjustments. Volume estimates are based on analyses of current and historical trends, population forecasts, regulatory changes, economic factors, and changes in industry practices. Increases are predicted in Solid Waste, Plumbing/Gas Piping, Vector/Nuisance Control, Food Protection, and Local Hazardous Waste.

**Cross Connections - \$150,432/2.28 FTEs.** This add is a component of the Plumbing/Gas Piping that will provide inspections of plumbing systems within buildings to assure that no cross connections of safe and unsafe water supplies exist. This program was continued until 1991 as a joint program with the Seattle Water Department. From 1991 until 1999, cross connection control has been the responsibility of the water purveyor. Effective April 1999, the State Board of Health amended 246-

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290 WAC to place the responsibility on the Plumbing Jurisdiction in each county. The Environmental Health Division is responsible for plumbing in the City of Seattle, unincorporated King County and twelve suburban cities.

**Central Environmental Health Rent - \$90,481.** The add supports the increase in rental cost of office space for the Central Environmental Health Staff. The agency received notice from the City of Seattle that the current facility would not be available in the year 2000.

**North Rehabilitation Facility (NRF) DUI & Jail Industries - \$179,643/4.00 FTEs**  
**DUI Revenue Backed Add - \$79,547/2.00 FTEs.** The request provides for the addition of one Office Technician and one Chemical Dependency Counselor position. These additions are in response to the County Auditor's recommendation regarding the DUI Offender Program. The Auditor recommended an increase in hours and an increase in direct services. Starting in 1998 the program was allowed to charge DUI offenders on a sliding scale basis. NRF collected approximately \$77,000 in 1998 and projects a collection of approximately \$90,000 for the year 1999 and a similar amount for 2000.

**Jail Industries Revenue Backed Add - \$100,096/2.00 FTEs.** This request provides for the addition of two Special Detention positions. The agency has contracts with the cities of Shoreline and Mercer Island to provide supervised inmate work crews to perform outdoor landscaping and maintenance functions. A qualified Special Detention Attendant must supervise each crew. These crews have been supervised in the past from regular security staff, thus creating gaps in coverage in the six dorms on campus. The positions are assigned responsibility for crews of four to six inmates that includes the safe and timely completion of customer work, while attending to the necessary health, safety and security requirements of the inmates.

**NRF Security Coverage - \$125,847/3.00 FTES.** This funding will add three Special Detention Attendant positions. The addition of these positions is intended to fill the gaps that exist in security coverage. The gaps in coverage have been covered in the past by using salary savings and extra help.

**NRF Resident Supplies - \$7,332.** This request provides for the replacement of approximately 30 beds that are badly deteriorated with rust, broken springs and worn and torn mattresses. It would also replace approximately 180 inmate uniforms that are in disrepair.

**Program Analyst IV - \$34,481/.50 FTE.** The addition, when added to the current half-time Program Analyst IV position, will provide full time analytical and financial support to the Jail Health Administrator for both the King County Correctional Facility and the Regional Justice Center.

### **Technical Adjustments**

**Position Clean Ups and Adjustments - (\$461,292/2.51 FTEs).** This decrease is the total of several technical adjustments and other miscellaneous changes that net to a negative number. Included in this item is an increase in hours for an Information Systems Professional from part-time to full-time, a decrease in one-time dental expenses, and infrastructure and overhead reduction in the regions.

**Central Rates - \$693,117.** Central rates include charges for financial services, telecommunications, prosecutor services, rent, and general government overhead.

**Technical Adjustment - (\$93,430/.38 FTE).** This change provides for the correction of errors made during the budget process.

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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### **Emergency Medical Services**

#### **Significant Program Additions**

**Program Analyst IV (TLT) - \$60,701/1.0 TLT.** Due to the failure of the Emergency Medical Services (EMS) levy in November of 1997, the King County Council called for the creation of Financial Planning Task Force to make recommendations regarding future funding and the operational aspects of the regional EMS system. This Term Limited Position will serve as project manager for the EMS Strategic Plan update for the next EMS levy period and coordinate the development with the EMS Advisory Committee and the Financial Staff Team. The Strategic Plan update will include a status report on the implementation and impact(s) of the various strategic initiatives, projections of future needs and make financing recommendations for the next levy period.

**Criteria Based Dispatch Licensing – \$23,000.** This request provides the expansion of the EMS Division Criteria Based Dispatch (CBD) and training material in the King County Emergency Medical Dispatch Program. This program generates revenues through:

- 1) The sale of CBD software by the EMS division
- 2) Licensing fees for use of copyrighted program materials
- 3) Contractual services for CBD Basic and Instructor training

**Regional Data System Enhancement Project - \$275,000.** This funding will provide for the continuance of the development of a regional EMS electronic data transmittal and reporting capability. It will permit better transmittal of EMS information, more accurate and complete information, and would allow fire departments and paramedic providers to access information electronically on their own departments. The project will eventually allow all 35 fire departments and fire districts to transmit standardized data electronically and rapidly access reports for their agency.

**Paramedic Vehicle Replacement - \$665,273.** The requested funding would provide for the replacement of six paramedic vehicles. The replacement includes two units for Bellevue Medic One and four units for King County Medic I. The replacements are a part of a regular replacement program.

#### **Technical Adjustments**

**EMS Technical Adjustments – (\$357,546/.18FTE).** The technical adjustment provides for the correction of errors and makes other technical changes to the agency budget. It includes the costs (\$258,257) of two Medic One units that were erroneously included in the initial budget building stage of the agency's budget development. It also reflects the net of reductions and increases in various accounts including but not limited to Miscellaneous Operating Supplies (\$54,837) and Other Minor Equipment and Small Tools (\$40,263).

**EMS Central Rates – (\$61,525).** The Central Rates for EMS decreased by \$61,525. The rates include charges for telecommunications, data processing, flex benefit and finance rates.

**Interest-Short Term Adjustment – (\$6,000,000).** The EMS levy passage in February of 1998 provided funding for the second half of 1998 expenditures and the following three years. However, because the tax revenues were not collected until 1999 and the timing of when the revenues were actually received, the Council adopted an ordinance, authorizing the sale of Tax Anticipation Notes to cover both the funding gap and subsequent cash flow needs in 1998 and beyond. In 1999, the agency borrowed approximately \$15 million and will borrow approximately \$9 million in the year 2000, which reflects the reduction of \$6 million.

### **Local Hazardous Waste**

#### **Significant Program Additions**

**Local Hazardous Waste Initiatives - \$1,506,435.** In 1998, the Local Hazardous Waste Management Plan Management Coordinating Committee asked division staff to develop hazardous

## **HEALTH & HUMAN SERVICES PROGRAM PLAN**

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waste initiatives to target unmet service needs and fund these initiatives from the Local Hazardous Waste Fund balance in the year 2000. The initiatives include:

- the addition of a program administrator
- additional suburban city grant support for implementing hazardous waste collection and education activities
- increase funding for disposal of banned pesticides in households and Small Quantity Generators (SQG - small businesses that generate approximately 220 pounds, or one half of a 55 gallon drum, of hazardous waste monthly)
- provide funding for stock piled hazardous waste in school chemistry labs
- provide for additional educational outreach services to K-12 schools
- provide funding for SQG voucher program for hazardous waste disposal incentives

## HEALTH & HUMAN SERVICES PROGRAM PLAN

Health and Human Service Program Area						
	1998 Adopted		1999 Adopted		2000 Proposed	
	Expenditures	FTEs	Expenditures	FTEs	Expenditures	FTEs
<b>Community and Human Service</b>						
COMMUNITY SERVICES -CX	11,280,742	35.40	12,256,181	38.15	10,587,060	39.04
DCHS ADMINISTRATION	3,452,143	10.50	3,706,624	11.50	1,428,284	12.00
ALCOHOLISM & SUBSTANCE ABUSE	0	0	18,792,701	100.00	19,912,801	89.00
DEVELOPMENTAL DISABILITIES	13,926,561	13.00	15,093,279	13.50	17,521,400	14.00
HUMAN SERVICES/CJ	869,626	0	873,582	0	914,076	0
FED HOUSNG & COMM DEV FND	17,175,296	26.92	17,940,832	28.92	16,973,228	28.75
HOUSING OPPORTUNITY ACQSN	2,992,163	3.50	-	3.50	-	4.50
MENTAL HEALTH	80,363,574	64.75	82,135,379	66.25	90,259,426	88.25
VETERANS RELIEF	1,479,869	7.00	1,827,060	7.00	1,751,648	7.00
YOUTH EMPLOYMENT	4,160,128	26.50	4,576,375	28.08	4,395,193	28.08
SPECIAL PROGRAMS	607,218	0	609,839	0	1,937,720	0
	<b>136,307,320</b>	<b>187.57</b>	<b>157,811,852</b>	<b>296.90</b>	<b>165,680,836</b>	<b>310.62</b>
<b>Public Health</b>						
EMERGENCY MEDICAL SERVICE	25,231,176	92.11	41,002,230	90.32	36,105,909	90.50
LOCAL HAZARDOUS WASTE	9,942,733 0		10,120,768 0		11,627,203 0	
PUBLIC HEALTH	147,077,252	1,376.03	141,482,292	1,344.08	151,285,961	1,353.62
	<b>182,251,161</b>	<b>1,468.14</b>	<b>192,605,290</b>	<b>1,434.40</b>	<b>199,019,073</b>	<b>1,444.12</b>
<b>Grants</b>						
H&HS GRANTS	1,563,792	7.75	3,834,924	9.20	1,197,613	12.00
	<b>1,563,792</b>	<b>7.75</b>	<b>3,834,924</b>	<b>9.20</b>	<b>1,197,613</b>	<b>12.00</b>
<b>Total Health and Human Services</b>	<b>320,122,273</b>	<b>1,663.46</b>	<b>354,252,066</b>	<b>1,740.50</b>	<b>365,897,522</b>	<b>1,766.74</b>

Public Defense division of DCHS is reported out in the Law, Safety and Justice program plan area.

**Grants:** The following agencies have grant monies: EMS and Human Services.